DOCUMENT RESUME

CG 018 110 ED 255 778

Maiden, R.; And Others **AUTHOR**

Rural Elderly: Impact of Social, Psychological Health TITLE

and Demographic Experiences on Adjustment in Women

and Men.

Nov 84 PUB DATE

21p.; Paper presented at the Annual Scientific NOTE

Meeting of the Gerontological Society (37th, San

Antonio, TX, November 16-20, 1984.)
Reports - Research/Technical (143) --

PUB TYPE

Speeches/Conference Papers (150)

MF01/PC01 Plus Postage. EDRS PRICE

*Adjustment (to Environment); Demography; *Health; **DESCRIPTORS**

Income; Individual Differences; *Older Adults; Psychological Characteristics; Retirement; *Rural

Population; *Sex Differences; Social Isolation; *Well

Being; Work Attitudes

ABSTRACT

An amended form of the Older American's Status and Needs Assessment Questionnaire assessed the prevalence of adjustment, as measured by the Bradburn Affect Scale, in a random stratified sample of 301 female and 140 male elderly rural residents in Allegany County, New York. The relationship between adjustment and biosocial, demographic, social, and personal problems, political participation, retirement, income, and other pertinent variables was investigated along with interactions by gender. Biosocial (health and physical disabilities), social isolation, housing, feelings about work and retirement, and social control all contributed significantly to adjustment. Sex role interacted with social isolation, biosocial factors, and retirement, but there were no significant differences among most demographic variables, perceived personal problems, and self-reported social-personality factors. Health, retirement, marriage, and income played a more important role in psychological well-being tor women than for men; the women respondents were older, more likely to be unmarried, and had much lower incomes than men. For both sexes, personal problems played a major role in maladjustment. Some sex differences were found in self-reported levels of health, number of physicians seen in the past year, religiosity, and feeling part of the neighborhood. All of these factors were more important in the negative affect of women than of men. (NRB)

Reproductions supplied by EDRS are the best that can be made from the original document. *************



RURAL ELDERLY:

IMPACT OF SOCIAL, PSYCHOLOGICAL HEALTH AND DEMOGRAPHIC EXPERIENCES ON ADJUSTMENT IN WOMEN AND MEN

- R. MAIDEN
- T. LEITKO
- S. PETERSON

ALFRED UNIVERSITY

ALFRED, NY 14802

U 8. DEPARTMENT OF EDUCATION NATIONAL INSTITUTE OF EDUCATION EDUCATIONAL RESOURCES INFORMATION

CENTER (ERIC)

These document has been reproduced as received from the person or organization organization.

Minor changes have been made to improve reproduction quality.

Figure 3 years a opinions stated in this document do not no resaltly represent official NIE prestors or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."



RURAL ELDERLY:

IMPACT OF SOCIAL, PSYCHOLOGICAL, HEALTH AND DEMOGRAPHIC EXPERIENCES ON ADJUSTMENT IN WOMEN AND MEN

ALTHOUGH THE PROBLEMS OF OLD AGE ARE LARGELY THE PROBLEMS OF WOMEN (BUTLER, 1980), LITTLE ATTENTION HAS BEEN PAID TO ISSUES SPECIFIC TO WOMEN OR MEN UNTIL RELATIVELY RECENTLY. A NEEDS ASSESSMENT SURVEY CONTAINING OVER 300 QUESTIONS ASSESSED THE PREVALENCE OF ADJUSTMENT, AS MEASURED BY THE BRADBURN AFFECT SCALE, IN A RANDOM STRATIFIED SAMPLE OF 301 FEMALE AND 140 MALE ELDERLY RURAL RESIDENTS IN ALLEGANY COUNTY, NY. THE RELATIONSHIP BETWEEN ADJUSTMENT AND BIOSOCIAL, DEMOGRAPHIC, SOCIAL, PERSONAL PROBLEMS, POLITICAL PARTICIPATION, RETIREMENT, INCOME AND OTHER PERTINENT VARIABLES WERE INVESTIGATED ALONG WITH INTERACTIONS BY GENDER. BIOSOCIAL (HEALTH AND PHYSICAL DISABILITIES), SOCIAL ISOLATION, HOUSING, FEELINGS ABOUT WORK AND RETIREMENT AND SUCIAL CONTROL ALL CONTRIBUTED SIGNIFICANTLY TO ADJUSTMENT WITH PERSONAL PROBLEMS, HOUSING, FINANCES, AND HEALTH HAVING THE GREATEST IMPACT. SEX ROLE INTERACTED WITH SOCIAL ISOLATION, BIOSOCIAL FACTORS AND RETIREMENT, BUT NO SIGNIFICANT DIFFERENCES AMONG MOST DEMOGRAPHIC VARIABLES, PERCEIVED PERSONAL PROBLEMS AND SELF-REPORTED SOCIAL-PERSONALITY FACTORS. IMPLICATIONS SPECIFIC TO WOMEN AND MEN ARE DISCUSSED.



J

PROBLEM

PROFOUND CHANGES ARE OCCURRING IN OUR POPULATION, YET SOCIAL POLICY DOES NOT ALWAYS REFLECT THESE CHANGES. WHILE WOMEN OUTNUMBER MEN OVER THE AGE OF 60 BY 6 MILLION, THIS GENDER IMBALANCE IS NOT GENERALLY CONSIDERED IN GOVERNMENTAL PROGRAMMING. THE OLDER THE AGE GROUP, THE GREATER THE GENDER IMBALANCE. FOR PERSONS 85 YEARS OF AGE AND OVER THE RATIO IS 229 WOMEN FOR EVERY 100 MEN (FOWLES, 1983). WHILE GENERALLY IGNORED, THESE LONGEVITY DIFFERENCES NEED TO BE SERIOUSLY CONSIDERED WHEN AREA AGENCIES ON AGING ARE DEVELOPING THEIR COMPREHENSIVE SYSTEMS OF CARE AND SERVICES. WHILE MOST PEOPLE 60 AND OVER ARE ENJOYING HEALTHY, HAPPY INDEPENDENT LIVING, GREATER AGE IS ASSOCIATED WITH A DIMINISHED CAPACITY TO FUNCTION INDEPENDENTLY DUE TO POOR HEALTH, LOW INCOME, LACK OF TRANSPORTATION AND OTHER BARRIERS TO SELF-SUFFICIENCY (FOWLES, 1983).

THESE PROBLEMS ARE OFTEN COMPLICATED BY LACK OF EMPLOYMENT, LOSS OF SPOUSE AND SOCIAL ISOLATION. EFFECTIVE PROGRAMMING REQUIRES KNOWLEDGE OF THE PREVALENCE AND DISTRIBUTION OF PROBLEMS ACROSS SUB-GROUPS, AS WELL AS HOW THESE PROBLEMS IN LIVING SPECIFICALLY IMPACT UPON ADJUSTMENT AND PSYCHOLOGICAL WELL-BEING. WITH THESE PURPOSES IN MIND THE ALLEGANY COUNTY OFFICE FOR AGING IN RURAL SOUTHWESTERN NEW YORK COMMISSIONED A NEEDS ASSESSMENT SURVEY OF ITS ELDERLY POPULATION. THIS STUDY WILL EXAMINE SOME OF THE DATA FROM THAT PROJECT.



SUBJECTS

RESPONDENTS WERE SELECTED FROM A LIST OF COUNTY RESIDENTS 60 YEARS OF AGE AND OVER. THE LIST CONTAINED APPROXIMATELY 3,500 NAMES. A TARGET SAMPLE SIZE OF 500 WAS SET. A TOTAL OF 441 INTERVIEWS WERE COMPLETED -- 88.2% OF THE TARGET SAMPLE SIZE; 301 WERE FEMALE AND 140 WERE MALES.

OVERALL THIS WAS AN ACCURATE SAMPLING OF THE COUNTY. THERE WERE SOME BIASES PRESENT, HOWEVER. THE SAMPLE IS OF THE NON-INSTITUTIONALIZED POPULATION, SLIGHTLY OLDER THAN THE COUNTY POPULATION AND DISPROPORTIONATELY FEMALE.

PROCEDURF

AN AMENDED FORM OF THE OLDER AMERICAN'S STATUS AND NEEDS ASSESSMENT QUESTIONNAIRE WAS ADMINISTERED (BRUKHARDT AND LEWIS, 1975). BIASES, AS MUCH AS POSSIBLE, WERE CONTROLLED BY A STRATIFIED SAMPLING PROCESS WHICH ASSURED THAT TOWNSHIPS IN ALL SIZE RANGES AND LOCATIONS WERE PROPORTIONATELY REPRESENTED. INTERVIEWERS WERE INSTRUCTED TO CONTACT THE HOUSEHOLDS SAMPLED FROM THE LIST AND TO ASSESS THE NUMBER OF PERSONS 60 YEARS OF AGE AND OVER IN RESIDENCE AND TO ALTERNATE IN INTERVIEWING MALES AND FEMALE RESPONDENTS WITHIN THE HOUSEHOLDS.



DEPENDENT MEASURES

BECAUSE THEY ARE INCLUDED WITHIN THE ASSESSMENT QUESTIONNAIRE AND BASED ON PRIOR RESEARCH, THE BRADBURN POSITIVE AFFECT SCALE WAS USED AS OUR DEPENDENT MEASURE OF PSYCHOLOGICAL WELL-BEING OR HAPPINESS AND THE BRADBURN NEGATIVE AFFECT SCALE WAS USED AS OUR DEPENDENT MEASURE OF MALADJUSTMENT OR DEPRESSION (BRADBURN, 1969).

EXPECTATIONS

IT WAS EXPECTED THAT INDEPENDENT VARIABLES SUCH AS HEALTH, INCOME, SOCIAL ISOLATION, AND MOBILITY WOULD IMPACT ON THE DEPENDENT MEASURES DIFFERENTLY AND BY SEX.



RESULTS

THE MOST INTERESTING AND SALIENT FINDINGS WERE:

- (1) THE INDEPENDENT VARIABLE "PERSONAL PROBLEMS" WAS SIGNIFICANTLY RELATED TO BRADBURN'S NEGATIVE AFFECTIVE SCALE (MALADJUSTMENT) BUT NOT TO BRADBURN'S POSITIVE AFFECTIVE SCALE (PSYCHOLOGICAL WELL-BEING).
- (2) ACTUAL PHYSICAL DEFICITS WAS ASSOCIATED WITH POSITIVE AFFECT (PSYCHOLOGICAL WELL-BEING) AND NOT ASSOCIATED WITH NEGATIVE AFFECT (MALADJUSTMENT); YET PERCEIVED HEALTH WAS MORE LIKELY TO BE ASSOCIATED WITH BOTH NEGATIVE AFFECT (MALADJUSTMENT) AND POSITIVE AFFECT.
- (3) OF THE DEMOGRAPHIC VARIABLES, AGE WAS ASSOCIATED WITH PSYCHOLOGICAL WELL-BEING BUT NOT SIGNIFICANTLY RELATED TO MALADJUSTMENT.
- (4) SOCIAL ACTIVITY WAS MORE LIKELY TO BE ASSOCIATED TO POSITIVE AFFECT (PSYCHOLOGICAL WELL-BEING) AS MEASURED BY ORGANIZATIONAL MEMBERSHIP, POLITICAL PARTICIPATION, AND HOW OFTEN ONE VISITS NEIGHBORS.
- (5) LIFE SATISFACTION WAS MORE LIKELY TO BE ASSOCIATED WITH MALADJUSTMENT AND SOCIAL MASTERY MANIFESTED A STRONGER ASSOCIATION WITH POSITIVE AFFECT. (SEE TABLE 1)

THESE FINDINGS ARE COMPATIBLE WITH EARLIER RESEARCH (BRADBURN, 1969) WITH AN ADULT POPULATION BUT UNDER THE AGE OF 60. THE IMPLICATION IS THAT MALADJUSTMENT AND PSYCHOLOGICAL WELL-BEING ARE INDEPENDENT DIMENSIONS AND NOT OPPOSITE ENDS OF THE SAME AFFECTIVE POLE.



TABLE 1

INDEPENDENT VARIABLES	DEPENDENT VARIABLES	
	BRADBURN AFFECT SCALE NEGATIVE / POSITIVE	
PERSONAL PROBLEMS E.G. HEALTH CARE COSTS,		
INSURANCE, LONELINESS, LEGAL HELP, INCOME, ETC.	.40***	NS
DEMOGRAPHIC		
AGE	NS	-20***
MARRIED	.07*	.11**
RURAL	NS	NS
EDUCATION	NS	.08*
INCOME	17***	.15**
HEALTH		
GOOD HEALTH (SELF-REPORT)	- ,12**	.15***
NUMBER DAYS SICK WITHIN PAST YEAR	NS	22 ***
WELL MOST OF THE TIME (SELF-REPORT)	18***	.21***
NUMBER OF DOCTORS SEEN IN PAST YEAR	.15***	NS
PHYSICAL DISABILITIES, E.G. NEED HELP IN PREPARING MEALS, SHOPPING, BATHING, WALKING, ETC.	NS	19 ***
SOCIAL		
ORGANIZATIONAL MEMBERSHIP	NS	.18***
RELIGIOSITY	17***	.21***
SEE FRIENDS OFTEN	09*	.17***
FEEL PART OF THE NEIGHBORHOOD	13**	.18***
HOW OFTEN VISIT NEIGHBORS	NS	.09*
POLITICAL ACTIVITY		
POLITICAL EFFICACY (AWARE/CONTACTED GOV'T AGENCY)	08*	.17***
POLITICAL PARTICIPATION (VOTED/MEMBER OF POLITICAL ORGANIZATION)	NS	.23***



SECTORS OF LIFE

Hou	IS	Ī	NG
	2	•	116

10001110		
SATISFACTION WITH HOME	17***	.20***
BUILDING NEEDS REPAIR	09*	.09
FINANCES		
AMOUNT OF MONEY ADEQUATE	22***	.15**
ENOUGH MONEY FOR EXTRAS	19 ***	.13**
Transportation	14**	.16**
RETIREMENT		
RETIRED	NS	09*
POSITIVE ABOUT RETIREMENT	17***	.10**
WOULD LIKE TO BE WORKING	.15***	NS
SOCIAL-PERSONALITY FACTORS		
LIFE SATISFACTION	-,39***	.30***
SOCIAL MASTERY	19***	.30***



^{* =} P < .05

^{** =} p < .01

GENDER DIFFERENCES I:

POSITIVE AFFECT/PSYCHOLOGICAL WELL-BEING

CLEAR SEX DIFFERENCES WERE FOUND:

- 1. FOR WOMEN, HEALTH PLAYED A MUCH MORE IMPORTANT ROLE IN PSYCHOLOGICAL WELL-BEING THAN FOR MALES (WITH THE EXCEPTION OF PHYSICAL DISABILITIES).
- 2 RETIREMENT IMPACTED ON WOMEN'S PSYCHOLOGICAL WELL-BEING BUT, SURPRISINGLY, NOT ON MEN'S PSYCHOLOGICAL WELL-BEING.
- 3. DEMOGRAPHIC VARIABLES OF INTEREST IMPACTING ON WOMEN AND NOT MEN INCLUDED MARRIAGE AND INCOME. (SEE TABLE 2A.)

WHILE IT IS POSSIBLE THAT THESE DIFFERENCES REFLECT DIFFERENCES IN ATTITUDES AND PREFERENCES BETWEEN THE SEXES ALONE, IT IS MORE LIKELY THAT THESE DIFFERENCES ARE RELATED TO THE GREATER PROBLEMS OF WOMEN. FOR EXAMPLE, IN THIS STUDY IT WAS FOUND THAT THE WOMEN WERE OLDER (MEAN AGE 75 VERSUS 72); MORE LIKELY TO BE UNMARRIED (69% vs. 31%); AND HAD MUCH LOWER INCOMES (MODE:\$5000 VS.\$14,000) THAN MEN. ALL OF THESE FACTORS MAY IMPACT UPON WOMEN'S PSYCHOLOGICAL WELL-BEING INDIRECTLY THROUGH SUCH MEDIATING VARIABLES AS HEALTH, MARRIAGE, RETIREMENT AND INCOME.



TABLE 2A

RELATIONSHIPS OF INTEREST FROM TABLE 2

BRADBURN'S POSITIVE AFFECT SCALE

	· MALES	<u>FEMALES</u>
SELF REPORTS OF HEALTH	NS	.18***
NUMBER OF DAYS ILL IN PAST YEAR	NS	28***
"WELL" MOST OF THE TIME	NS	.27***
POSTIIVE ABOUT RETIREMENT	NS	.16**
MARRIAGE	NS	.12*
INCOME	NS	.15**
* = p < .05	<.01 **	* = p < .001

POSSIBLE IMPLICATION: GREATER LONGEVITY AMONG WOMEN LEADS TO GREATER PROBLEMS.

TABLE 2

DEPENDENT VARIABLES

INDEPENDENT VARIABLES

BRADBURN'S POSITIVE AFFECT SCALE PERSONAL PROBLEMS E.G. HEALTH CARE COSTS, FEMALE MALE INSURANCE, LONELINESS, LEGAL HELP, INCOME, ETC. NS NS DEMOGRAPHIC -.16*** -.20** **AGE** .12** MARRIED NS RURAL NS NS **EDUCATION** NS NS INCOME .15** NS HEALTH .18*** GOOD HEALTH (SELF-REPORT) NS NUMBER DAYS SICK WITHIN PAST YEAR NS .27*** WELL MOST OF THE TIME NS NUMBER OF DOCTORS SEEN IN PAST YEAR NS NS PHYSICAL DISABILITIES, E.G. NEED HELP IN PREPARING MEALS, SHOPPING, BATHING, WALKING, ETC. -.16" -.21*** SOCIAL 17** .16* ORGANIZATIONAL MEMBERSHIP .21*** .21*** **RELIGIOSITY** .18*** SEE FRIENDS OFTEN .18*** .16** FEEL PART OF THE NEIGHBORHOOD NS HOW OFTEN VISIT NEIGHBORS NS NS POLITICAL ACTIVITY POLITICAL EFFICACY (AWARE/CONTACTED GOV'T AGENCY) .21** .15" POLITICAL PARTICIPATION (VOTED/MEMBER OF POLITICAL .21*** ORGANIZATION)



SECTORS OF LIFE	MALE	FEMALE
Housing		
SATISFACTION WITH HOME	.21**	.21***
BUILDING NEEDS REPAIR	NS	NS
FINANCES		
AMOUNT OF MONEY ADEQUATE	.18*	.09*
ENOUGH MONEY FOR EXTRAS	NS	.13***
TRANSPORTATION	NS	.16**
RETIREMENT		
RETIRED	NS	.12*
POSITIVE ABOUT RETIREMENT	NS	.16**
WOULD LIKE TO BE WORKING	NS	NS
SOCIAL-PERSONALITY FACTORS		
LIFE SATISFACTION	.39***	.26***
SOCIAL MASTERY	.23**	.32***



 $^{^{*}}$ = P < .05

^{** =} p < .01

GENDER DIFFERENCES: II

NEGATIVE AFFECT/MALADJUSTMENT SCALE:

FEW SEX DIFFERENCES OF INTEREST WERE FOUND ON THE NEGATIVE AFFECT/MALADJUSTMENT SCALE. APPARENTLY, FOR BOTH SEXES PERSONAL PROBLEMS (HEALTH CARE COST, INCOME, ETC.) PLAY A MAJOR ROLE IN MALADJUSTMENT. SOME SEX DIFFERENCES WERE FOUND IN SELF-REPORTED LEVEL OF HEALTH, NUMBER OF PHYSICIANS SEEN IN THE PAST YEAR, RELIGIOSITY, AND FEELING PART OF THE NEIGHBORHOOD. ALL OF THESE FACTORS WERE MORE IMPORTANT IN THE NEGATIVE AFFECT OF WOMEN THAN OF MEN. ALSO, IT MAY BE NOTED THAT WOMEN WHO PREFERRED TO BE WORKING WERE MORE LIKELY TO FEEL NEGATIVE AFFECT THAN MEN, PERHAPS AGAIN REFLECTING THE SPECIAL NEEDS OF WOMEN (I.E. IN THIS CASE MORE INCOME).

FINALLY, DEPRESSED/MALADJUSTED WOMEN DISPLAYED LESS SATIS-FACTION WITH THEIR HOMES YET DEPRESSED/MALADJUSTMENT MEN WERE MORE LIKELY TO CLAIM THAT THEIR HOMES WERE IN NEED OF REPAIR. (SEE TABLE 3A).

TABLE 3A

RELATIONSHIP'S OF INTEREST FROM TABLE 3

BRADBURN'S NEGATIVE AFFECT SCALE

	MALES	<u>FEMALES</u>
RELIGIOSITY	NS	21***
FEELS PART OF THE NEIGHBORHOOD	NS	11
WOULD LIKE TO BE WORKING	NS	.19***
SATISFACTION WITH HOUSING	NS	21***
HOUSE NEEDS REPAIR	.21**	NS
* = p < .05	** = P < .01	*** = p < .001

IMPLICATION: Intervention programs must take into account the special needs of women.

TABLE 3

INDEPENDENT VARIABLES	DEPENDENT VARIABLES	
PROBLEMS E.G. HEALTH CARE COSTS, INSURANCE, LONELINESS, LEGAL HELP, INCOME, ETC.	BRADBUR NEGATIVE AFF MALE .35***	
<u>Demographic</u>		
AGE	NS	NS
MARRIED	NS	NS
RURAL	NS	NS
EDUCATION	NS	NS
INCOME	22.**	15**
HEALTH		
GOOD HEALTH (SELF-REPORT)	NS	15***
NUMBER DAYS SICK WITHIN PAST YEAR	NS	NS
WELL MOST OF THE TIME	21**	18***
NUMBER OF DOCTORS SEEN IN PAST YEAR	NS	.19***
PHYSICAL DISABILITIES, E.G. NEED HELP IN PREPARING MEALS, SHOPPING, BATHING, WALKING, ETC.	NS	NS
SOCIAL		
ORGANIZATIONAL MEMBERSHIP	NS	NS
RELIGIOSITY	NS	21***
SEE FRIENDS OFTEN	NS	09*
FEEL PART OF THE NEIGHBORHOOD	NS	11
HOW OFTEN VISIT NEIGHBORS	NS	NS
POLITICAL ACTIVITY		
POLITICAL EFFICACY (AWARE/CONTACTED GOV'T AGENCY)	NS	NS
POLITICAL PARTICIPATION (VOTED/MEMBER OF POLITICAL ORGANIZATION)	NS	NS



	MALE	FEMALE
SECTORS OF LIFE		
Housing		
SATISFACTION WITH HOME	ris .	21***
BUILDING NEEDS REPAIR	.21**	115
FINANCES		
AMOUNT OF MONEY ADEQUATE	16*	27***
ENOUGH MONEY FOR EXTRAS	22**	-,20***
Transportation (NEED)	NS	.15***
RETIREMENT		
RETIRED	NS	NS
POSITIVE ABOUT RETIREMENT	20**	14***
WOULD LIKE TO BE WORKING	NS	.19***
SOCIAL-PERSONALITY FACTORS		
LIFE SATISFACTION	29***	42***
SOCIAL MASTERY	-,21**	17**



^{* =} P < .05

^{** =} P < .01

 $^{^{***} =} P < .001$

IMPLICATIONS AND DISCUSSION

TWO MAJOR IMPLICATIONS MAY BE GLEANED FROM THE DATA, FIRST, AREA AGENCIES DESIGNING SOCIAL PROGRAMMING THAT ASSISTS THE ELDERLY WITH PERSONAL PROBLEMS (HEALTH CARE COSTS, INSURANCE, LEGAL HELP, INCOME) MAY IMPACT ON DEPRESSION/MALADJUSTMENT BUT NOT NECESSARILY PROMOTE GREATER PSYCHOLOGICAL WELL-BEING. GREATER PSYCHOLOGICAL WELL-BEING IS MORE LIKELY TO BE ASSOCIATED WITH THE DIMENSION OF SOCIAL PARTICIPATION RATHER THAN PERSONAL PROBLEMS. TO ALLEVIATE MALADJUSTMENT AND BRING ABOUT A SENSE OF WELL-BEING PROGRAMS MUST INVOLVE BOTH FACTORS.

SECONDLY, THE PROBLEMS OF OLD AGE MAY BE TRULY THE PROBLEMS OF WOMEN AS NOTED BY BUTLER, 1980. THEREFORE, WHILE WE ARE NOT SUGGESTING THAT THE NEEDS OF ELDERLY MEN BE IGNORED, WE ARE SUGGESTING THAT FOR OPTIMUM USE OF SOCIAL PROGRAMS AND FOR OPTIMUM ALLOCATION OF FINANCIAL RESOURCES THAT THE SPECIAL NEEDS OF WOMEN BE PRIMARILY ADDRESSED.



REFERENCES

- BRADBURN, N. M. THE STRUCTURE OF PSYCHOLOGICAL WELL-BEING, ALDINE PUBLISHING COMPANY, CHICAGO, 1969.
- BRUKHARDT, J. E. AND LEWIS, J. C. THE OLDER AMERICAN'S STATUS

 AND NEEDS ASSESSMENT QUESTIONNAIRE. U. S. DEPARTMENT OF
 HEALTH, EDUCATION AND WELFARE, 1975.
- BUTLER, R. N. IN THE OLDER WOMEN: CONTINUITIES AND DISCONTINUITIES, U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, JULY, 1980.
- FOWLES, D. THE CHANGING OLDER POPULATION. AGING, MAY-JUNE, 1983, PP. 6 11.



APPENDIX

BRADBURN'S NEGATIVE & POSITIVE AFFECT SCALES (FINDINGS OF INTEREST FROM TABLE 1)

		NEGATIVE	AFFECT	POSITIVE
NUMBER OF PERSO	NAL PROBLEMS	.40***	BUT NOT ON	NS
AGE		NS	TON TUB NO	-20***
SOCIALIZATION:	ORGANIZATIONAL MEMBERSHIP	NS		.18***
	POLITICAL PARTICIPATION	NS	BUT NOT	.23***
	HOW OFTEN VISIT NEIGHBORS	NS	ON	.09*
HEALTH:	NUMBER OF DAYS ILL	NS		-22***
	PHYSICAL DISABILITIES	NS		19***

IMPLICATION: Depression and well-being are <u>NOT</u> opposite poles of one dimension and therefore, strategy interventions must take all impacting factors into account.

